Subject – Standard Operating Procedure (SOP): Handling of Detenus and Inmates during Pandemic – reg

Standard Operating Procedure (SOP) on Handling of Detenus and Inmates during Pandemic is enclosed for kind perusal and further necessary action.

The following portions of the Model Prison Manual -2016 are also enclosed:-
1. Extract of Chapter VII, titled “Medical Care”
2. Extract of Chapter IX, titled “Transfer of Prisoners”
3. Extract of Chapter XIII, titled “Emergencies”

A copy of the Model SOP on “Implementation of Body Worn Cameras in Indian correctional Administration System, sent earlier to the MHA is also enclosed for ready reference.

Further, it is stated that SOP has been prepared from the angle of security and general precautions to be taken during pandemic. The points related to medical issues may be got vetted by with health experts.

This issues with the approval of the Director General, BPR&D

(Tajender Singh Luthra)
IG/Director (R&CA)

Encls; (5) as above.

Smt. Punya Salila Srivastava, JS (WS & IS-1), MHA
BPR&D UO No 40/01/2020, 26th April-2020

PA To JS (WS)
Standard Operating Procedure (SOP): Handling of Detenus and Inmates during Pandemic.

Today the world is facing an unprecedented crisis in the form of COVID-19 pandemic. This crisis has infected all the spheres of life and institutions, including Prisons. The prison inmates are equally, if not more, vulnerable than any other group of people residing anywhere.

The Model Prison Manual, 2016, brought out by the MHA, elaborately deals with the issues of Medical Care vide Chapter VII, Transfer of Prisoners during Epidemics vide Chapter IX and Emergencies including Epidemics vide Chapter XIII. The copies of the relevant portions of these chapters are enclosed. Weblink to the Model Prison Manual 2016 is provided here.

http://bprd.nic.in/WriteReadData/CMS/PrisonManualNew.pdf

During the present pandemic generated by COVID-19, there have been situations where people violating lockdown had to be detained enmass and kept in temporary prisons, which do not have facilities to deal with such peculiar situations. There have also been incidents of protests in some Prisons related to apprehensions regarding COVID-19 spread and restrictive measures adopted by the authorities. Therefore, this SOP deals with various situations that have been arising or may arise even in the future regarding safe custody, transport, healthcare, avoidance of transmission of communicable diseases, the safety of the prison, healthcare, sanitary, and court staff.

Cardinal Principles

The following principles are the guiding light of this SOP:-

1. Security of Inmates
2. Social Distancing.
4. Close Observation.
5. Minimum Movements.
6. Tracking and Tracing.
7. Remote Meetings.

A) Procedure to be followed for existing inmates:-

1. The inmates qualifying the criteria for remission, furlough and premature release, as per law and Jail Manuals, may be released immediately.

2. However, released inmates, who may be asymptomatic, may be tracked and traced by GPS based wrist band.

3. Any inmates returning from parole or furlough should be lodged in separate barracks/cells for a fixed number of days as decided by the health experts.

4. Sufficient number of teams may be formed for carrying out this screening. Careful screening of all inmates may be conducted based on the COVID-19 parameters, prescribed by the Indian Council of Medical Research (ICMR).

5. COVID-19 Tests may be conducted of the persons found vulnerable in the screening. If an inmate is found positive, he will be sent for quarantine in separate barracks/buildings earmarked for the purpose. All his co-inmates will also be quarantined and checked for COVID-19.

6. Proper caution may be exercised while shifting the COVID-19 positive inmates for quarantine. The staff must wear full and appropriate personal protective equipment (PPE), while dealing with the COVID-19 positive inmates. The vehicles carrying the COVID-19 inmates must be properly sanitized, and their doors and windows must be properly sealed. The COVID-19 inmates must also be made to wear masks, gloves and visors.

7. Meal timings for inmates should be staggered.

8. Rearrange sitting arrangement for inmates at the dining space.
9. Inmates under quarantine should have separate dining space, and the meal should be provided in disposable plates.

10. The inmates should be encouraged to ensure personal hygiene.

B) Procedure to be followed for new inmates/detainees:

1. Careful screening of all new inmates shall be conducted based on the COVID-19 parameters, prescribed by the ICMR. Any suspected inmate based on this screening may be tested for COVID-19. If an inmate is found COVID-19 positive, he shall be put in quarantine in a separate barrack, earmarked for the purpose.

2. Only new or properly cleaned clothing and bedding articles should be provided to new inmates.

3. There may be some instances of the influx of detainees who might have had a history of foreign travel or exposure to COVID-19 patients. For such a scenario, a separate building with sufficient space may be earmarked to act as a holding area until their screening is completed. This holding area should be properly sanitized before use.

4. Detainees should be segregated into two distinct groups; one group over fifty years and another group below fifty years. The detainees, who are asymptomatic but suspected to have been in contact with the COVID-19 positive patients, should be sent to quarantine, and detainees who are symptomatic should be sent for COVID-19 test.

5. Such asymptomatic and symptomatic detainees should be lodged separately and should have separate dining space.

6. The Jail Hospital/Medical Ward should be sufficiently upgraded by increasing the number of beds, personal equipment (PPE) for the medical staff, COVID-19 testing kits, and other medical equipment.
7. In case, a separate building is not available for the holding area, a temporary structure may be erected for use as holding area and screening ward.

C) Procedure to be followed for temporary prisons:

1. Depending on the circumstances and availability of resources, when a new building, like a stadium, guest house, school building, community hall, etc., is notified as a temporary jail, all precautions, as applicable to a regular prison, should be adopted.
2. Special consideration may be given to sanitization of such building, strict access control, social distancing and disposal of medical and other waste, etc.
3. If there are concerns regarding the escape of such detainees, they may be made to wear GPS based wrist bands for the purpose of tracing and tracking.
4. CCTV may be installed to keep an eye on such detainees, who may escape the temporary prison.
5. The watch and ward staff may wear body-worn cameras to keep a strict vigil on the activities of such detainees. A copy of the SOP for using body-worn cameras in prisons is also enclosed.

D) Procedure to be followed for the production of inmates/detainees at various courts:

1. As far as possible, the facility of video conferencing should be used to avoid any travel outside the prison by the inmates/detainees.
2. The vehicles carrying the inmates must be thoroughly sanitized before and after each trip. All the doors and windows must be properly sealed during the travel.
3. Proper distance must be maintained between the prisoners while on the vehicle and on the court premises. Such prisoners and prison staff escorting them should be provided with face mask. Since the escort personnel have to hold the prisoners with their hands, they should be issued gloves especially for the escort duty.

E) **Other precautions to be followed by the Prison authorities:**

1. Only one point of entry/exit should be used as far as possible.
2. The staff at the entrance should use masks, visors, gloves, thermal scanning equipment and sanitizers while screening the inmates and performing other duties.
3. As many of the prisons are already overcrowded, the frequency of fumigation and spraying of disinfectants should be increased.
4. All the toilets, bathrooms, kitchens, and other common areas must be cleaned and sanitized daily.
5. Prison staff interacting with the inmates, who are in quarantine, should wear face masks, visors, and gloves.
6. All inmates should be made aware of COVID-19 symptoms and the importance of maintaining personal hygiene and social distancing. Signages at essential points should be placed to make the Prison staff and inmates informed of the precautions to be taken to prevent the spread of COVID-19. All the inmates and staff must be provided with personal soaps, sanitizers, visors, and face mask, free of cost.
7. All the clothing and bedding of the inmates should be cleaned by bleaching powder in hot water. The clothing and bedding of the inmates under quarantine should be cleaned separately.
8. The facility of Mulaqats, i.e., meeting between the prisoners and their family members, should be stopped till the pandemic is controlled. E-mulaqats between inmates and his family members should be allowed.
9. Number of calls by the inmates to their family may be increased by the local administration.

10. Group activities that are not of essential nature be stopped and only crucial group activities should be carried out duly following the guidelines for distance of at least six feet between two individuals.

11. Anybody (Prison staff or inmates) having any symptoms of cough, cold sneezing, breathlessness, sore throat, fever, should be sent for thorough medical checkup and follow up.

12. Canteen articles, diet articles, private clothing, etc. must be subjected to fumigation before allowing them inside the prisons.

N.B. Suggestions on medical points may be vetted by the Health Department.
Bureau of Police Research & Development  
(Research & Correctional Administration Division)  

Sub: **Standard Operating Procedure (SOP): Handling of Detenus and Inmates during Pandemic – reg.**

In continuation of BPR&D UO No.40/01/2020, dated 26th April, 2020, vide which SOP on Handling of Detenus and Inmates during Pandemic was sent to MHA, and with reference to Para 9 of MHA letter No.17013/17/2020-PR, dated April 27, 2020, to all States/UTs, suggested guidelines for use and disposal of protective gears as per the guidelines received from the Ministry of Health and Family Welfare vide their letter No. Z.28015/81/2020, dated 27th April, 2020, are enclosed for perusal and further necessary action, please.

This issues with the approval of the DG, BPR&D.

Encl: *As above.*

(S.K. Dhyani)  
DIG/Dy. Director (R&CA)

**MHA: Smt. Punya Salila Srivastava, JS(WS & IS-I), North Block, New Delhi.**  
BPR&D UO No. 40/01/2020-Prisons  
Date: April 30, 2020.

*Issued*  
30/4/2020
Guidelines for use and disposal of protective gears, as per the guidelines of the Ministry of Health and Family Welfare are as follows:

1. **Gloves**
   - Wear gloves at all times while on duty.
   - Remove gloves properly and perform hand hygiene on coming in contact with blood or body fluids and then put on a new pair of gloves.
   - The procedure of wearing and taking off gloves is at Annexure-I.

2. **Facial protection**
   - Use of triple layer medical mask for facial protection is recommended while on duty. Using a mask incorrectly may hamper its effectiveness and may cause harm to the personnel. So it must be used correctly. The correct steps in wearing and taking off the mask are at Annexure-II.

3. **Face shields**
   - A face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.
   - Security personnel on COVID duty will wear a face-shield at all times while on duty.
   - While taking off the face shield, ensure that the front surface is NOT touched. If one accidently touches the same, perform hand hygiene as detailed in the document.
   - The face shield is reusable. The front portion can be decontaminated by wiping with 70% alcohol or 1% sodium hypochlorite solution. This is to be followed by hand hygiene.
   - The specifications of protective gears (triple layer mask, gloves and face shield) are at Annexure-III.

4. **Safe disposal of used protective gears**
   - For disposal of used mask/gloves, guidance is at Annexure-IV.
Technique for donning and removing gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

I. HOW TO DON GLOVES:

1. Take out a glove from its original box
2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)
3. Don the first glove
4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist
5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand
6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

II. HOW TO REMOVE GLOVES:

1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out
2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove
3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water
Wearing and taking off Triple layer medical mask

- Hold the Triple layer medical mask in right alignment for the nasal clip to be placed over the nose. The external pleats of the triple layer mask should face downwards.
- Open the mask pleats and place the mask carefully to cover mouth and nose.
- For the triple layer mask, tie the upper strings first, followed by the lower string. Fix securely to minimize any gaps between face and mask.
- **While in use, avoid touching the mask especially its front side, because this surface is likely to be highly contaminated and may pose a risk of infection.**
- Remove the triple layer mask by untying the lower string first, followed by the upper string.
- Be careful NOT to touch the front surface of mask while removing.
- Disposed off in the recommended manner as mentioned in the document.
- After removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand rub (if available) or soap and water.
- Replace masks with a new clean, dry mask after 8 hours or as soon as they become damp/humid.
- Do not reuse single-use masks.
Specifications of Personal Protective Gears required by police/security personnel performing duty in COVID-19 affected areas

Gloves

- Latex (examination) gloves
- Non-sterile
- Powder free
- Gloves preferably reach mid-forearm (minimum 280 mm total length)
- Different sizes (6.5 & 7)
- Quality compliant with the below standards, or equivalent:
  a) EU standard directive 93/42/EEC Class I, EN 455.
  b) EU standard directive 89/686/EEC Category 111, EN 374.
  c) ANSI/SEA 105-2011.

Face Shield

- Made of clear plastic and provides good visibility to both the wearer and the patient.
- Adjustable band to attach firmly around the head and fit snugly against the forehead.
- Fog resistant (preferable).
- Completely covers the sides and length of the face.
- Re-usable (made of material which can be cleaned and disinfected).
- Quality compliant with the below standards, or equivalent:
  b) ANSI/SEA Z87.1-2010.

Triple Layer Medical Mask

- Three layered medical mask of non-woven material with nose piece, having filter efficiency of 99% for 3 micron particle size.
  a) ISI specifications or equivalent
Procedure to dispose off used masks and gloves

Option 1:

Used masks/gloves and disposable tissues should be placed in a disposable leak-proof garbage bag and sprayed with 1% sodium hypochlorite allowing a contact time of 30 mins and allow it to air dry. Thereafter it can be disposed of through the general waste management system.

Option 2:

Soak the mask, gloves and used tissues in 1% sodium hypochlorite solution. The solution can be bought from medical stores. Soak the used mask, gloves etc. in this solution for minimum of 30 minutes. Ensure the masks and/or other wastes are below the surface of the liquid. After 30 minutes, discard the remaining solution in drain. Secure the disinfected waste (masks, disposable gloves, tissues etc.) in a polybag and discard in a bin meant for dry waste or non-biodegradable waste.

Option 3:

In cities, where authorized waste collectors are available and provisioning has been made for them to collect bio-medical waste, hand over the bags containing biomedical waste to them.